## ISDH 2003 Hospital Service Report

(Annual Report under Indiana Code 16-21-6)

## **Community Hospital of Anderson/Madison County**

City: Anderson County: Madison Year: 2003

Provider Type: General Acute

I. Inpatient Care				
Hospital Service Description				Average Charge Per Discharge
Burn Care	0	0	0	\$0
Cardiac Intensive	0	0	0	\$0
ICU Med/Surg	9	436	1,139	\$3,860
ICU Neonatal	0	0	0	\$0
ICU Pediatric	0	0	0	\$0
Medical/Surgical	58	3,533	14,047	\$2,540
Neonatal Intermed	0	0	0	\$0
Obstetrics	22	1,396	3,063	\$2,215
Pediatric	13	295	684	\$1,494

Psychiatric	0	0	0	\$0
Rehabilitation	0	0	0	\$0
Substance Abuse	0	0	0	\$0
Swing Beds	NA	0	0	\$0
Other Services	9	123	440	NA
Acute Subtotal	111	5,783	19,373	NA
Normal Newborn	20	1,034	2,386	\$1,235

II. Outpatient Visits				
Circulatory System	12,888	Digestive System	4,781	
Endocrine System	15,344	Injuries and Poison	10,309	
Mental Disorder	1,641	Musculoskeletal	14,186	
Neoplasms	3,370	Nervous	4,576	
Respiratory	7,423	Urinary	12,163	
Other/Unknown	66,516	Total Visits	153,197	
Number of Visits to Emer	32,094			
Percent of Emergency Department Visits of Total Visits			20.9%	

## **Identification of Hospital Services**

Each hospital has identified if it has one or more of a standard list of 41 services. This list of services is updated annually by each hospital from the information initially requested by the Centers for Medicare & Medicaid Services when the hospital was initially certified for Medicare payment.

N - Acute Renal Dialysis	N - Alcohol/Drug Service	Y - Anesthesia Services
N - Blood Bank	N - Burn Care Unit	N - Chiropractric Service
Y - Coronary Care Unit	N - Dental Services	Y - Dietetic Services
Y - Emergency Service	N - Home Care Program	N - Hospice
Y - Inpatient Surgical Services	Y - Intensive Care Unit	Y - Laboratory(Clinical)
Y - Laboratory(Anatomical)	Y - Long Term Care Unit	Y - Neonatal Nursery
N - Nuclear Medicine Services	Y - Obstetrics Services	
Y - Occupational Therapy	N - Open Heart Surgery	Y - Operating Room
N - Optometric Service	N - Organ Bank	N - Organ Transplant
Y - Outpatient Service	Y - Outpatient Surgery Unit	Y - Pediatric Services
Y - Pharmacy	Y - Physical Therapy	Y - Postoperative Recovery
N - Psychiatric Services	Y - Radiology(Diagnostic)	Y - Radiology(Therapeutic)
N - Rehabilitation Services	Y - Respiratory Services	N - Self Care Unit
N - Shock Trauma	N - Social Services	Y - Speech Pathology

NA =	Not applicable	NMF =	No meaningful figure	NR =	Not reported

**Health Care Regulatory Services** 

2003 Hospital Services Main Page